Flu Shot Reminder



It's Not Too Late to Get the Flu Shot. We are in the midst of flu season and a flu vaccine is still the best way to prevent infection and the complications associated with the flu. But re-vaccination is necessary each year because the flu viruses change each year. Encourage your Medicare patients who haven't already done so to get their annual flu shot and don't forget to immunize yourself and your staff. Protect yourself, your patients, and your family and friends. Get Your Flu Shot. It's Not Too Late! Remember - Influenza vaccination is a covered Part B benefit. Note that influenza vaccine is NOT a Part D covered drug. For more information about Medicare's coverage of adult immunizations and educational resources, go to CMS's website:

http://www.cms.hhs.gov/MLNMattersArticles/downloads/SE0667.pdf.

MLN Matters Number: MM5507 Related Change Request (CR) #: 5507

Related CR Release Date: January 26, 2007 Effective Date: January 26, 2007

Update on CMS Actions to Reverse Invalid Overpayments Generated by Managed Care Informational Unsolicited Responses (MCIURs) - (Invalid MCIURs from the Common Working File (CWF))

Provider Types Affected

Physicians, suppliers, and providers who submit claims to Medicare contractors (fiscal intermediaries (FIs), carriers, Part A/B Medicare Administrative Contractors (A/B MACs), durable medical equipment regional carriers (DMERCs), and/or DME Medicare Administrative Contractors (DME/MACs)).

Provider Action Needed

This article provides information regarding overpayment recovery actions that may be taken by your Medicare contractor and the circumstances that have caused these recovery actions. We estimate that between 150,000 – 300,000 claims may be affected by these actions. If, due to the conditions stated below, an overpayment recovery action has occurred for your claims, your Medicare contractor is in the process of correcting the payment. You need not take any action at this time. Because these actions will affect Medicare contractors in varying degrees, you should stay tuned to your Medicare contractor's web site for additional details.

Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents.

Background

In MLN Matters article SE0681

(http://www.cms.hhs.gov/MLNMattersArticles/downloads/SE0681.pdf), the Centers for Medicare & Medicaid Services (CMS) advised providers of certain eligibility system issues related to managed care Medicare beneficiaries. In brief, article SE0681 alerted providers that, in some instances, Medicare may be recovering certain overpayments due to system updates on beneficiary eligibility. When such overpayments are identified, Medicare systems generate a managed care informational unsolicited response (MCIUR), which triggers the overpayment recovery.

During the week of December 17, 2006, Medicare systems were updated with some incorrect Managed Care enrollment data, which, in turn, caused the systems to create some incorrect MCIURs. Medicare files have now been corrected and CMS is working diligently with Medicare contractors to stop the invalid overpayment recoveries from occurring. In addition, where action to recover the overpayments has already occurred, CMS has instructed your contractor to reverse the action and reissue payment to you.

Key Points

- CR5507 states that recovery action should stop if it has been initiated and reversed if MCIURs have already effected a recovery.
- Physicians and other providers who bill Medicare contractors need not take any action since contractors will automatically make the necessary adjustments as CR5507 is implemented.
- Your contractor will post more detailed information on their web site as CR5507 is implemented.

Additional Information

If you have questions, please contact your Medicare carrier, FI, A/B MAC, DME MAC, and/or DMERC at their toll-free number which may be found at: http://www.cms.hhs.gov/MLNProducts/downloads/CallCenterTollNumDirectory.zip on the CMS website.

For complete details regarding this issue, please see the official instruction (CR5507) issued to your Medicare carrier, FI, A/B MAC, DME MAC, and/or DMERC. That instruction may be viewed by going to http://www.cms.hhs.gov/Transmittals/downloads/R262OTN.pdf on the CMS web site.

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